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## BIB DATA SHEET

CONFIRMATION NO. 5097

<b>SERIAL NUMBER</b> 10/585,112	<b>FILING or 371(c) DATE</b> 06/30/2006 <b>RULE</b>	<b>CLASS</b> 033	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> 82753	
<b>APPLICANTS</b> Amy Levinson, MP Upper Galilee1, ISRAEL; Gabriel Kohner, Upper Galilee, ISRAEL; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/01123 12/31/2003 <i>ACJ 12/19/07</i> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 02/11/2007					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /AMY COHEN Acknowledged JOHNSON/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> NATH & ASSOCIATES 112 South West Street Alexandria, VA 22314 UNITED STATES <i>Total Figs 6</i>					
<b>TITLE</b> Pocket level					
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		